

Entered - 11-18-00 - sb  
CL 01L0017 - GWENDOLYN BURNS

CLAIM OF: **ENTERPRISE RENT-A-CAR**  
3109 Maple Drive  
Suite 325  
Atlanta, Georgia 30305

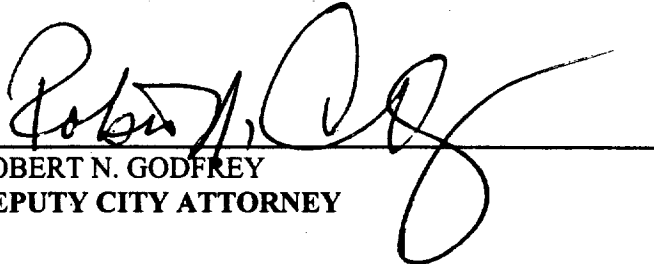
01-*R*-0292

For vehicular damages alleged to have been sustained as a result of an automobile accident on November 18, 2000 at Interstate 75/85 South & 14<sup>th</sup> Street Overpass, NW.

**BY PUBLIC SAFETY AND LEGAL ADMINISTRATION  
COMMITTEE:**

**BE IT RESOLVED** by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **ENTERPRISE RENT-A-CAR** the sum of **\$2,000.00** in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of an automobile accident on November 18, 2000 at Interstate 75/85 South & 14<sup>th</sup> Street Overpass, NW as is more particularly set forth in the within claim; said sum taken from and charged to account 2J01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD  
CITY ATTORNEY

BY:   
ROBERT N. GODFREY  
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0017

Date: February 16, 2001

Claimant /Victim ENTERPRISE RENT-A-CAR  
BY: (Atty) (Ins. Co.) \_\_\_\_\_  
Address: 3109 Maple Drive, Suite 325, Atlanta, Georgia 30305  
Subrogation: Claim for Property damage \$ 3,305.42 Bodily Injury \$ \_\_\_\_\_  
Date of Notice: 12/28/00 Method: Written, Proper X Improper \_\_\_\_\_  
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X  
Date of Occurrence 11/18/00 Place: Interstate 75/85 South & 14<sup>th</sup> Street Overpass, NW  
Department PUBLIC WORKS Division Sewer Operations  
Employee involved Robert L. Coleman Disciplinary Action: Pending Review

NATURE OF CLAIM: Claimant's vehicle was struck by a City vehicle that made an "improper lane change".  
The city employee was cited for same.

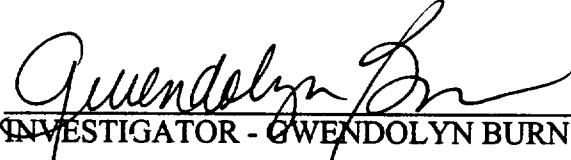
INVESTIGATION:

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others \_\_\_\_\_ Written \_\_\_\_\_ Oral \_\_\_\_\_  
Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police X Dept Report \_\_\_\_\_ Other \_\_\_\_\_  
Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_  
Citation disposition: City Driver X Claimant Driver \_\_\_\_\_

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial \_\_\_\_\_  
Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other \_\_\_\_\_ Damages reasonable \_\_\_\_\_  
City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement X  
Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_  
Claimant Negligent \_\_\_\_\_ City Negligent X Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ 2,000.00 Adverse \_\_\_\_\_ Account charged: 1A01 \_\_\_\_\_ 2J01 X 2H01 \_\_\_\_\_  
Claims Manager:  Concur/date 02-16-01  
Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

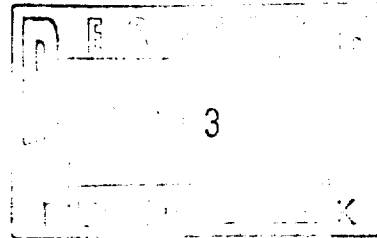


3109 Maple Drive, Suite 325  
Atlanta, GA 30305  
404-364-5210

12-13-00P01104 (110)

*BURNS*  
*12/28/00*  
*DN*

12/6/00



ENTERED -  
01L0017 - GWEN BURNS

City of Atlanta  
Attn: Municipal Clerk  
55 Trinity Ave SW  
Atlanta, GA 30335-0332

RE:	Our Claim Number:	DX0312L65
	Your Insured:	Robert L. Coleman
	Date of Accident:	11/18/00
	Total Amount Owed:	\$3,305.42

Dear Sir or Madam,

This letter concerns an automobile accident involving our rental car and your insured. Our investigation reveals that your insured is legally liable for the damages to our vehicle.

You will find enclosed all documentation and a claims summary for your review. Please send us a check within fifteen (15) days of the date of this letter with our claim number on it.

If you have any questions or need additional information please call me at (404) 442-7088.

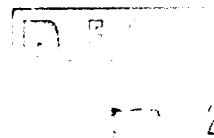
Thank you.

Sincerely,

Kim Williams  
Loss Control Administrator

Enclosure

cc: file



01-R-0292

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